

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) George W. Roussos and	l Lindsay E. Nadea	u
II. Name of lobbyist's partnership, firm or corporation, if	any:	
Orr & Reno, P.A.		
(Name of partnership, firm or corporation)		
45 S. Main St. PO Box 3550 Conc	ord NH	03302
Business Address: (Street) (Town/City)	(State)	(Zip Code)
(603) 224-2381 (603) 224-2318	B e-mail lnadea	au@orr-reno.com
(Telephone) (Fa		
III. This statement covers: (Choose one – file separate reportable expense transactions which are not attributable		ay file a separate report for
All reportable transactions occurring in the months prior to	the reporting date relative to the	ne following client:
New Hampshire Association of Dome	stic Insurance Com	panies
(Full Name of Client as it appears on the I		<u> </u>
OR ☐ All reportable transactions by the lobbyist (including the lounrelated to any particular client.	bbyist's family), or the lobbying	g firm listed below which are
IV. Date of Report April 26, 2017	July 26, 2017 🛚	
Reports cover: activity from date of registration to 3/31/17	activity from 4/1/17 to 6/30/17	•
October 25, 2017 activity from 7/1/17 to 9/30/17	January 31, 2018 ⊠ activity from 10/1/17 to 12/31.	/17
V. There have been no fees received and no reportable of this box is checked, complete just this form and submit it to a Concord, NH 03301.		
VI. Check if additional reports are attached:		
☑ If you have received fees or made expenditures, you must	file Addendum A- Fees and E	xpenses
 If you have paid an honorarium or reimbursed expenses, y Expense Reimbursement 	ou must file Addendum B Re	port of Honorariums or
[] If you, your firm, or your family has made political contri	outions, you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and and complete to the best of my knowledge and belief.		
(Signature of lobbyist)	1/31/18 (Dai	te) Dr-
, ,	\~	KECEIVED
Lindsay E. Nadeau (Print Name of lobbyist)		• <u> U</u>
(JAN 31 2018
		NEW HAMPSHIRE DEPARTMENT OF STATE

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) George W. Roussos and Lindsay	E. Nad	eau
II. Name of lobbyist's partnership, firm or corporation, if any:		
Orr & Reno, P.A.		
(Name of partnership, firm or corporation)		
III. Name of Client New Hampshire Association of Domestic Insurance Companies	Date _	1/31/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations,	or public relations service
a) Total of all fees received in this reporting period	a) \$	5,199.09
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$	102,300.91
c) Total of all fees received to date (Add lines a and b)	c) \$	107,500.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	22,128.73
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and in any be file any be file any be file any enses; (be meals press than \$10 d with a varting periode of greater than \$25 expense r	f expenditures are made bed for the lobbyist(s)/firm total of all expenses pair total of all expenses pair that is given to the personalue of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of , but not greater than \$5 erimbursement, or politic
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	31.82
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

c) Total of all itemized expenditures reported in detail in section VI.

c) \$ _____

d) Total expenses for this reporting period	d) \$	0.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	15,100.00
f) Total of all expenses year to date	f) \$	15,131.82
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees d	uring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
1		
	\$	
	\$	
•••••••••••••••••••••••••••••••••••••••		
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the for	egoing information
4mallan	1/31/1	.8
(Signature of lobbyist)		ite)
Lindsay E. Nadeau		
(Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

(Print Name of lobbyist)

Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Orr & Reno, P.A. Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): New Hampshire Association of Domestic Insurance Companies Date of Report (check one): April 26, 2017 July 26, 2017 □ October 25, 2017 □ January 31, 2018 🖾 I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): 1 Addendum A(s). Addendum B(s). ____ Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. Lindsay E. Nadeau